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| AMENDMENT TRANSMITTAL LETTER | | | Docket No. NEB-241-PUS | | |
| Application No. 10/593,790 | Filing Date March 23, 2005 | Examiner D. M. Ramirez | Art Unit 1652 | | |
| Applicant(s): Jack S. Benner, II et al. | | | | | |
| Invention: A Novel Modular Type II Restriction Endonuclease, CspCI and the Use of Modular Endonucleases for Generating Endonucleases with New Specificities | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 0 | - 20 = | 0 | x 26.00 | 0.00 |
| Independent Claims | 0 | - 3 = | 0 | x 110.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>14-0740</u> as described below. A duplicate copy of this sheet is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
| /Harriet M. Strimpel, D.Phil./ Harriet M. Strimpel, D.Phil. Attorney/Agent Reg. No.: 37,008 | | | Dated: <u>November 19, 2008</u> | | |
| NEW ENGLAND BIOLABS, INC 240 County Road Ipswich, Massachusetts 01938 (978) 380-7373 | | | | | |

Application No. (if known): 10/593,790

Attorney Docket No.: NEB-241-PUS

Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this correspondence is being transmitted via the Office electronic filing system in accordance with 37 CFR 1.6(a)(4):

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on November 19, 2008
Date

/Harriet M. Strimpel, D.Phil./

Signature

Harriet M. Strimpel, D.Phil.

Typed or printed name of person signing Certificate

37,008

Registration Number, if applicable

(978) 380-7373

Telephone Number

Note: Each paper must have its own certificate of mailing.

Amendment
Certificate of Electronic Filing (1 page)
Amendment Transmittal (1 page)